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| B1 (Official | Form 1)(1/0 | 08) | | | | oamon | | .go <u> </u> | | | | | |
|---|--|---------------------------|---|-----------------------------------|--|-------------------------------------|---|--|--|---|---|---------------------|-----------------------------|
| | | | United No | | | ruptcy of Illino | | | | | Vol | untary | Petition |
| | ebtor (if ind: /illiam P. | ividual, ent | er Last, First | , Middle): | | | Name | of Joint Do | ebtor (Spouse | e) (Last, First | , Middle): | | |
| All Other N (include ma | All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | All O (inclu | ther Names de married, | used by the a maiden, and | Joint Debtor trade names | in the last 8 | 3 years | | | |
| (if more than | Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all) xxx-xx-5045 | | | | IN Last f | our digits o | | r Individual-' | Гахрауег I. | D. (ITIN) N | o./Complete EIN | | |
| 417 Poa | Street Address of Debtor (No. and Street, City, and State): 417 Poachers Circle Belvidere, IL | | | | | Address of | f Joint Debtor | r (No. and St | reet, City, a | and State): | | | |
| | | | | | г | ZIP Code 61008 | | | | | | | ZIP Code |
| County of F Boone | Residence or | of the Prin | cipal Place o | of Busines: | | 01000 | Count | y of Reside | ence or of the | Principal Pl | ace of Busi | ness: | |
| Mailing Address of Debtor (if different from street address): | | | | Mailii | ng Address | of Joint Debt | tor (if differe | nt from stre | eet address): | | | | |
| | | | | | Г | ZIP Code | | | | | | | ZIP Code |
| | Principal As from street | | | r | <u>'</u> | | • | | | | | | • |
| | Type of | f Debtor | | 1 | Nature | of Business | ; | | Chapter | r of Bankru | otcy Code | Under Whi | ch |
| Type of Debtor (Form of Organization) (Check one box) ■ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership | | | (Check one box) Health Care Business Single Asset Real Estate as defin 11 U.S.C. § 101 (51B) Railroad Stockbroker Commodity Broker | | | s defined | Chapt Chapt Chapt Chapt Chapt Chapt | ter 7 ter 9 ter 11 ter 12 | of □ C | hapter 15 P a Foreign I hapter 15 P | etition for R Main Procee etition for R Nonmain Pr | eding ecognition | |
| | f debtor is not is box and stat | | | ☐ Othe | ☐ Clearing Bank ☐ Other Tax-Exempt Entity (Check box, if applicable) ☐ Debtor is a tax-exempt organizunder Title 26 of the United State Code (the Internal Revenue Co | | e) ganization d States | defined "incuri | are primarily co d in 11 U.S.C. s red by an indivi onal, family, or | (Checonsumer debts, § 101(8) as idual primarily | for | | are primarily ess debts. |
| | | Filing F | ee (Check o | ne box) | | | Check | one box: | | Chapter 11 | Debtors | | |
| Full Filing Fee attached Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | | tor Check | Debtor is a if: Debtor's a to insider all applicate A plan is Acceptant | aggregate noi s or affiliates) | ncontingent l ncontingent l n are less than with this petition were solici | or as define iquidated d \$2,190,00 on. ted prepetit | d in 11 U.S. ebts (exclud) 00. | C. § 101(51D). ing debts owed e or more | | | |
| Statistical/Administrative Information ☐ Debtor estimates that funds will be available for distribution to unsecured credit ☐ Debtor estimates that, after any exempt property is excluded and administrative there will be no funds available for distribution to unsecured creditors. | | | | | es paid, | | THIS | S SPACE IS I | FOR COURT | USE ONLY | | | |
| 1- 49 | Number of C: 50- 99 | reditors 100- 199 | 200- 999 | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | |
| Estimated A \$0 to \$50,000 | Assets \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |
| Estimated L \$0 to \$50,000 | \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |

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B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Blair, William P. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ JASON H. ROCK June 15, 2009 (Date) Signature of Attorney for Debtor(s) **JASON H. ROCK** Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(1/08)

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

x /s/ William P. Blair

Signature of Debtor William P. Blair

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

June 15, 2009

Date

Signature of Attorney*

X /s/ JASON H. ROCK

Signature of Attorney for Debtor(s)

JASON H. ROCK

Printed Name of Attorney for Debtor(s)

BARRICK SWITZER LAW OFFICE

Firm Name

6833 STALTER DRIVE ROCKFORD, IL 61108

Address

Email: jrock@bslbv.com

(815) 962-6611 Fax: (815) 962-1758

Telephone Number

June 15, 2009

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Blair, William P.

Signatures

Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D(Official Form 1, Exhibit D) (12/08)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | Case No. | |
|-------|------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- □ 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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| B 1D(Official Form 1, Exhibit D) (12/08) - Cont. |
|---|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |
| I certify under penalty of perjury that the information provided above is true and correct. |
| Signature of Debtor: /s/ William P. Blair William P. Blair |
| Date: June 15, 2009 |

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B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | Case No | | |
|-------|------------------|--------|---------|---|--|
| • | | Debtor | •• | | |
| | | | Chapter | 7 | |
| | | | • | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 200,000.00 | | |
| B - Personal Property | Yes | 4 | 24,126.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 195,931.61 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 10 | | 55,127.38 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 2 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 0.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | 2,851.00 |
| Total Number of Sheets of ALL Schedules | | 23 | | | |
| | T | otal Assets | 224,126.00 | | |
| | | | Total Liabilities | 251,058.99 | |

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Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | Case No. | |
|-------|------------------|--------|----------|---|
| _ | | Debtor | | |
| | | | Chapter | 7 |
| | | | * | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 0.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 2,851.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 0.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 0.00 |
|--|------|-----------|
| Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 55,127.38 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 55,127.38 |

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B6A (Official Form 6A) (12/07)

| In re | William P. Blair | Case No. | |
|-------|------------------|----------|--|
| | | Debtor | |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Single Family Residence 417 Poachers Circle Belvidere, IL 61008 | Fee | Н | 200,000.00 | 182,034.54 |
|---|--|---|--|----------------------------|
| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |

Sub-Total > 200,000.00 (Total of this page)

Total > 200,000.00

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B6B (Official Form 6B) (12/07)

| In re | William P. Blair | Case No. | _ |
|-------|------------------|----------|---|
| _ | | Debtor | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property N | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|----|---|---|---|---|
| 1. | Cash on hand | Assorted Coins | - | 100.00 |
| | | Cash On Hand | - | 100.00 |
| 2. | Checking, savings or other financial | Personal Checking Account At Chase | - | 100.00 |
| | accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Personal Savings Account At Chase | - | 800.00 |
| 3. | Security deposits with public | ComEd Security Deposit | - | 250.00 |
| | utilities, telephone companies, landlords, and others. | NICOR Security Deposit | - | 1.00 |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | 1/2 Interest In 4 TV's; 3 DVD's; Stereo With Receiver & Tuner; Personal Computer; Leather Living Room Set; Chairs; Bedroom Set; And Other Random Household Articles | , J | 1,500.00 |
| 5. | Books, pictures and other art | Assorted Beer Mirrors | - | 150.00 |
| | objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | Collector Plates | - | 100.00 |
| | oner concentions of concentries. | Figurines | - | 100.00 |
| 6. | Wearing apparel. | Standard Wearing Apparel | - | 200.00 |
| 7. | Furs and jewelry. | Diamond Ring & Gold Necklaces | - | 2,000.00 |
| | | 2 Watches | - | 200.00 |
| 8. | Firearms and sports, photographic, | Golf Clubs | - | 100.00 |
| | and other hobby equipment. | Bicycles | - | 25.00 |
| | | | | |

Sub-Total > 5,726.00 (Total of this page)

³ continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In | re William P. Blair | | | Debtor | , Case | No | |
|-----|--|--|---------------|----------------------------|----------------|---|---|
| | | | | | | | |
| | | SC | CHEDULE | B - PERSONAL P | ROPERTY | | |
| | Type of Property | N O N E | | Description and Location o | f Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 9. | Interests in insurance policic Name insurance company of policy and itemize surrender refund value of each. | f each | | | | | |
| 10. | Annuities. Itemize and name issuer. | e each | 6 Allstate Wh | nole Life Policies/Cash S | urrender Value | - | 400.00 |
| 11. | Interests in an education IR. defined in 26 U.S.C. § 5300 under a qualified State tuition as defined in 26 U.S.C. § 52 Give particulars. (File separatecord(s) of any such interest 11 U.S.C. § 521(c).) | b)(1) or on plan 29(b)(1). rately the | | | | | |
| 12. | Interests in IRA, ERISA, Ke other pension or profit shari plans. Give particulars. | eogh, or X | | | | | |
| 13. | Stock and interests in incorpand unincorporated business Itemize. | | | | | | |
| 14. | Interests in partnerships or j ventures. Itemize. | oint X | | | | | |
| 15. | Government and corporate land other negotiable and nonnegotiable instruments. | bonds X | | | | | |
| 16. | Accounts receivable. | | Jake Smith | | | - | 1,500.00 |
| 17. | Alimony, maintenance, supproperty settlements to which debtor is or may be entitled. particulars. | the the | | | | | |
| 18. | Other liquidated debts owed including tax refunds. Give | l to debtor X particulars. | | | | | |
| 19. | Equitable or future interests estates, and rights or powers exercisable for the benefit o debtor other than those liste Schedule A - Real Property. | s f the d in | | | | | |
| | | | | | | | |
| | | | | | (Total | Sub-Tot of this page) | al > 1,900.00 |

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In re | William P. Blair | Case No. |
|-------|------------------|----------|
| | | , |

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | Type of Property | N O Description and Location of E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|---|-----------------------------------|------------------------------------|--|
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | Х | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | х | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | |
| 25. | Automobiles, trucks, trailers, and | 2003 Dodge Grand Caravan | J | 7,000.00 |
| | other vehicles and accessories. | 2002 Dodge Truck Ram 1500 | н | 7,500.00 |
| | | 1993 Dodge Caravan | J | 500.00 |
| | | 1993 Plymouth Acclaim | н | 500.00 |
| 26. | Boats, motors, and accessories. | X | | |
| 27. | Aircraft and accessories. | Х | | |
| 28. | Office equipment, furnishings, and supplies. | X | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | Carpenter Tools | Н | 1,000.00 |
| 30. | Inventory. | x | | |
| 31. | Animals. | x | | |
| | | | Sub-Tot (Total of this page) | al > 16,500.00 |

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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 $B6B\ (Official\ Form\ 6B)\ (12/07)$ - Cont.

| In re | William P. Blair | Case No | |
|-------|------------------|---------|--|
| | | Debtor | |

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|--|------------------|--------------------------------------|---|---|
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 24,126.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (12/07)

| In re | William P. Blair | Case No |
|-------|------------------|---------|
| | | |

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled to (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3) | | Check if debtor claims a homestead exe \$136,875. | emption that exceeds |
|---|---|--|---|
| Description of Property | Specify Law Provid Each Exemption | | Current Value of Property Without Deducting Exemption |
| Real Property Single Family Residence 417 Poachers Circle Belvidere, IL 61008 | 735 ILCS 5/12-901 | 15,000.00 | 200,000.00 |
| <u>Cash on Hand</u> Assorted Coins | 735 ILCS 5/12-1001(b) | 100.00 | 100.00 |
| Cash On Hand | 735 ILCS 5/12-1001(b) | 100.00 | 100.00 |
| Checking, Savings, or Other Financial Accounts, Compensation of Personal Checking Account At Chase Personal Savings Account At Chase | Certificates of Deposit 735 ILCS 5/12-1001(b) 735 ILCS 5/12-1001(b) | 100.00 800.00 | 100.00 800.00 |
| Household Goods and Furnishings 1/2 Interest In 4 TV's; 3 DVD's; Stereo With Receiver & Tuner; Personal Computer; Leather | 735 ILCS 5/12-1001(b) | 1,500.00 | 1,500.00 |

| Living Room Set; Chairs; Bedroom Set; And Other Random Household Articles | | | |
|---|---|----------|----------|
| Wearing Apparel Standard Wearing Apparel | 735 ILCS 5/12-1001(a) | 200.00 | 200.00 |
| <u>Furs and Jewelry</u> Diamond Ring & Gold Necklaces | 735 ILCS 5/12-1001(b) | 1,400.00 | 2,000.00 |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 2002 Dodge Truck Ram 1500 | 735 ILCS 5/12-1001(c) | 2,400.00 | 7,500.00 |
| <u>Machinery, Fixtures, Equipment and Supplies Used</u> Carpenter Tools | <u>l in Business</u> 735 ILCS 5/12-1001(d) | 1,000.00 | 1,000.00 |

22,600.00 213,300.00 Total:

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B6D (Official Form 6D) (12/07)

| In re | William P. Blair | Case No | |
|-------|------------------|---------|--|
| _ | | Debtor | |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGEN | QU L D | SPUTE | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|-----------------|-----------|--|-----------|--------|-------|--|---------------------------------|
| Account No. xxxxxx784-6 | | | Home Equity Line Secured By | T | T E | | | |
| Citibank, N.A. P.O. Box 209012 Brooklyn, NY 11220-9012 | | - | Single Family Residence 417 Poachers Circle Belvidere, IL 61008 | | D | | | |
| | | | Value \$ 200,000.00 | | | | 49,034.54 | 0.00 |
| Account No. | | T | Purchase Money Loan Secured By | | | | · | |
| Larry Watson 110 E. Roosevelt Road Stillman Valley, IL 61084-8809 | | - | 2002 Dodge Truck Ram 1500 | | | | | |
| | | | Value \$ 7,500.00 | 1 | | | 7,000.00 | 0.00 |
| Account No. xxxxxx7974 | | | First Mortgage Secured By | | | | · | |
| Washington Mutual c/o Codilis & Associates 15W030 North Frontage Rd., #100 Burr Ridge, IL 60527 | x | - | Single Family Residence 417 Poachers Circle Belvidere, IL 61008 | | | | | |
| | | | Value \$ 200,000.00 | | | | 134,497.07 | 0.00 |
| Account No. xxxxxxxxx9890 | | | Purchase Money Loan Secured by | | | | | |
| Wells Fargo P.O. Box 29704 Phoenix, AZ 85038 | x | J | 2003 Dodge Grand Caravan | | | | | |
| | | | Value C 700000 | \dashv | | | 5 400 00 | 0.00 |
| continuation sheets attached | | <u>1_</u> | Value \$ 7,000.00 (Total of | Subt | | | 5,400.00 195,931.61 | 0.00 |
| | | | (Report on Summary of S | Т | ota | ıl | 195,931.61 | 0.00 |

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B6E (Official Form 6E) (12/07)

| In re | William P. Blair | Case No |
|-------|------------------|----------|
| - | | Debtor , |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6F (Official Form 6F) (12/07)

| In re | William P. Blair | | Case No. | |
|-------|------------------|--------|----------|--|
| _ | | Debtor | | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | Ç | U | Þ | | |
|--|---------|-------------|---|--------|-------|---------------------------------|---|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODEBTOR | C H H | | N N | GD- | I S P U T E D | | AMOUNT OF CLAIM |
| Account No. x0912 | | | Collection For Advanced Pain Intervention & Francis Family Chiropractic | T | DATED | | Ī | |
| Account Recovery Services, Inc. P.O. Box 2526 Loves Park, IL 61132 | х | J | | | | | | 639.64 |
| Account No. xxxxxx9985 | | | | | | T | 1 | |
| AFNI, Inc. P.O. Box 3097 Bloomington, IL 61702 | | - | | | | | | |
| | | | | | | | | 100.00 |
| Account No. Attorney Ray A. Ferguson | | | Collection For Account Recovery Services, Inc. | | | | | |
| 216 N. Court Street Rockford, IL 61103 | × | J | | | | | | 1.00 |
| Account No. xxxxxxxx1701 | | | Charge Card | | | H | + | |
| Blain's Farm & Fleet P.O. Box 981439 El Paso, TX 79998 | | _ | | | | | | |
| | | | | | | | | 2,060.46 |
| 9 continuation sheets attached | _ | · | (Total of t | Subt | | | , | 2,801.10 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No. | _ |
|-------|------------------|----------|---|
| _ | | Debtor | |

| | 10 | 1 | L LWK Live O | 10 | 1 | 15 | · |
|---|----------|-------|---|-----------|-------------|-----------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | ONL QU L DA | D I S P U T E D | AMOUNT OF CLAIM |
| Account No. xxxx xxxx xxxx 3694 | | | Charge Card | | E | | |
| Blain's Farm & Fleet GE Money Bank P.O. Box 960061 Orlando, FL 32896-0061 | | _ | | | | | 1.00 |
| Account No. xxxx1205 | T | T | Collection For Washington Mutual | + | T | | |
| Bureau of Collection Recovery, Inc. 7575 Corporate Way Eden Prairie, MN 55344 | | - | | | | | 1.00 |
| Account No. xxxxxxxx2025 | ╁ | ╁ | Charge Card | + | + | + | |
| Capital One P.O. Box 30281 Salt Lake City, UT 84130 | | _ | | | | | 861.00 |
| Account No. xxxx-xxxx-xxxx-8647 | t | t | Charge Card | \dagger | t | <u> </u> | |
| Capital One P.O. Box 70886 Charlotte, NC 28272-9903 | | - | | | | | 815.40 |
| Account No. xxxx-xxxx-xxxx-8647 | ┢ | + | Charge Card | + | \vdash | | |
| Capital One Bank USA, N.A. P.O. Box 6492 Carol Stream, IL 60197-6492 | | _ | | | | | 761.65 |
| Sheet no. 1 of 9 sheets attached to Schedule of | 1_ | | <u> </u> | Sub | tota | ı al | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | 2,440.05 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | C | <u> </u> | ! | |
|--|----------|-------------|---|-----------|----------|-----------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | 11 | N I S | AMOUNT OF CLAIM |
| Account No. xx1215 | | | Medical Services | Т | T | | |
| Cevene Care Clinic 6451 E. Riverside Blvd., #103 Rockford, IL 61114-4421 | x | J | | | | | 23.40 |
| Account No. xx1216 | ╁ | | Medical Services | + | + | + | 23.40 |
| Cevene Care Clinic 6451 E. Riverside Blvd., #103 Rockford, IL 61114-4421 | x | J | | | | | |
| | | | | \perp | | | 79.80 |
| Account No. xxxx xxxx xxxx 6325 | 4 | | Charge Card | | | | |
| Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153 | | - | | | | | 2,525.31 |
| Account No. xxxx xxxx xxxx 1095 | ╁ | | Charge Card | + | | + | 2,525.51 |
| Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153 | | - | | | | | 825.28 |
| Account No. 6325 | | | Collection For Chase | + | 1 | | |
| Chase Cardmember Service P.O. Box 15548 19886-5548 | | - | | | | | 1.00 |
| Sheet no. 2 of 9 sheets attached to Schedule of | f | <u> </u> | <u> </u> | Sub | oto | <u>l</u> tal | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total o | | | | 3,454.79 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| | l c | Ни | sband, Wife, Joint, or Community | I c | U | D | |
|---|----------|------------------|---|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | DALLQUIDATE | S P | AMOUNT OF CLAIM |
| Account No. xxxx xxxx xxxx 4314 | | | Charge Card | ٦т | T E | | |
| Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153 | | - | | | D | | 5,391.45 |
| Account No. 6325 | ╁ | | Collection For Chase | + | | \vdash | |
| Chase Card Services P.O. Box 659509 San Antonio, TX 78265 | | _ | | | | | 1.00 |
| Account No. xxxxxxxx0025 | ╁ | | Charge Card | + | | \vdash | 1.00 |
| Citi P.O. Box 6241 Sioux Falls, SD 57117 | | - | | | | | 13,192.00 |
| Account No. x9 CH 145 | t | | Attorney For JPMorgan Chase Bank, Boone | T | | | |
| Codilis & Associates, P.C. 15W030 North Frontage Road Suite 100 Willowbrook, IL 60527 | x | - | County Case No. 09 CH 145 | | | | 1.00 |
| Account No. xxxx6976 | f | | Collection For Physicians Immediate Care | \dagger | | | |
| Creditors' Protection Service 202 W. State Street, Suite 300 P.O. Box 4115 Rockford, IL 61110-0615 | | _ | | | | | 201.70 |
| Sheet no. 3 of 9 sheets attached to Schedule of | • | | | Sub | | | 18,787.15 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | this | pag | ge) | 10,707.15 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| | 10 | l | should Wife Island on Occasionality | 1.0 | 1 | L | |
|---|-----------------|---------|---|-----------|----------|-------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGEN | Q | I S P U T E | AMOUNT OF CLAIM |
| Account No. 3694 | | | Collection For GE Money Bank | T | T | | |
| GE Money Bank P.O. Box 981127 El Paso, TX 79998-1127 | | - | | | D | | 1.00 |
| Account No. BAA075 | | | | + | - | | |
| Guzzardo Performance Music 3010 Charles Street Rockford, IL 61108 | | - | | | | | |
| | | | | | | | 76.68 |
| Account No. xxxx xxxx xxxx 6637 Home Depot Credit Services Processing Center Des Moines, IA 50364-0500 | | - | Charge Card | | | | 257.78 |
| Account No. xxxx-xxxx-xxxx-8512 | | | Charge Card | | t | H | |
| HSBC Business Solutions P.O. Box 5219 Carol Stream, IL 60197-5219 | x | J | | | | | 1,707.25 |
| Account No. xxxxxxxxxxxxxx8512 | | | Collection For HSBC | | \vdash | | 1,101.20 |
| HSBC Business Solutions P.O. Box 4160 Carol Stream, IL 60197 | x | J | | | | | 1.00 |
| Sheet no. 4 of 9 sheets attached to Schedule | of | | | Sub | tota | 1 | 1.00 |
| Creditors Holding Unsecured Nonpriority Claims | . OI | | (Total o | | | | 2,043.71 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| CDEDITORIS NAME | С | Hu | sband, Wife, Joint, or Community | С | U | D | |
|---|----------|-----|---|-----------|-------------|----------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | U C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGEN | UZLLQULDATE | DISPUTED | AMOUNT OF CLAIM |
| Account No. xx1804 | | | Charge Card | Т | T E | | |
| HSBC/Bergners P.O. Box 15521 Wilmington, DE 19805 | | н | | | D | | 1.00 |
| Account No. BLAW1000 | | | Medical Services | + | | | 1.00 |
| Ignacio Omengan, MD 461 N. Mulford Road, Suite 10 Rockford, IL 61107-5288 | | - | | | | | |
| | | | | | | | 175.00 |
| Account No. Janet Wattlers Center 526 W. State Street Rockford, IL 61101 | | _ | Medical Services | | | | 134.70 |
| Account No. xxxxxx2190 | | | Charge Card | + | | | |
| Kay Jewelers 375 Ghent Road Akron, OH 44333 | | - | | | | | 797.00 |
| Account No. xxxxxx2190 | H | | Charge Card | + | | | 737.00 |
| Kay Jewelers P.O. Box 740425 Cincinnati, OH 45274-0425 | | _ | | | | | 1.00 |
| Sheet no. 5 of 9 sheets attached to Schedule of | | | | Subi | tota | 1 | 1.00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 1,108.70 |

Case 09-72444 Doc 1 Filed 06/15/09 Entered 06/15/09 11:46:22 Desc Main Document Page 22 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| | 1 - | 1. | | 1 - | 1 | | |
|--|--------|-----|--|------------|-------------|---------|-----------------|
| CREDITOR'S NAME, | CODEBT | Hu | sband, Wife, Joint, or Community | 16 | U N | D | |
| MAILING ADDRESS | Ď | Н | DATE CLAIM WAS INCLIDED AND | Ņ | ŀ | ISPUTED | |
| INCLUDING ZIP CODE, | B | W | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM | H | ď | Ü | |
| AND ACCOUNT NUMBER | I | J | IS SUBJECT TO SETOFF, SO STATE. | N | Ų | Ī | AMOUNT OF CLAIM |
| (See instructions above.) | O R | С | is substituted in the second s | E | Ď | Б | |
| Account No. xxxxxx2190 | | | Collection For Kay Jewelers | \rac{1}{7} | UNLIQUIDATE | | |
| | | | | - | D | | |
| Kay Jewelers | | | | | | | |
| P.O. Box 1799 | 1 | - | | | | | |
| Akron, OH 44309 | | | | | | | |
| | | | | | | | 1.00 |
| Account No. xxxxxxxx4184 | | | Charge Card | | | | |
| Lowe's | | | | | | | |
| P.O. Box 981064 | | Н | | | | l | |
| | | ١., | | | | | |
| El Paso, TX 79998 | | | | | | | |
| | | | | | | | 1.00 |
| Account No. xxxxxx2334 | ╀ | _ | Haility Corvince | - | | | 1.00 |
| Account No. xxxxxx2334 | - | | Utility Services | | | | |
| NICOR Gas | | | | | | | |
| P.O. Box 8350 | Ιx | J | | | | | |
| Aurora, IL 60507-8350 | | ľ | | | | | |
| Adioia, ie 00307-0330 | | | | | | | |
| | | | | | | | 389.00 |
| Account No. | ╀ | | Medical Services | - | | | 303.00 |
| Account No. | - | | Medical Services | | | | |
| OSE Saint Anthony Madical Contar | | | | | | | |
| OSF Saint Anthony Medical Center | l۷ | J | | | | | |
| 5666 E. State Street | ^ | | | | | | |
| Rockford, IL 61108-2472 | | | | | | | |
| | | | | | | | 865.00 |
| Account No. | ╀ | | Medical Services | - | | | 605.00 |
| 1000ant 110. | + | | INCAICAI OGI VICES | | | | |
| OSF Saint Anthony Medical Center | | 1 | | | | | |
| 5666 E. State Street | Ιx | J | | | | l | |
| Rockford, IL 61108-2472 | 1^ | آ | | | 1 | l | |
| NUCKIUIU, IL 01100-24/2 | 1 | | | | | l | |
| | | 1 | | | | | |
| | | | | | | | 513.00 |
| Sheet no. 6 of 9 sheets attached to Schedule of | | | | Sub | tota | 1 | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of | | | | 1,769.00 |
| creations from any consecuted from priority claims | | | (Total of | | rug | , -, | |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| _ | | Debtor | |

| CDEDITORIS NAME | С | Hu | sband, Wife, Joint, or Community | С | U | D | |
|---|-----------------|-------------|---|-------------|-------------|---------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COXTLXGEX | DZLLQULDAFE | ISPUTED | AMOUNT OF CLAIM |
| Account No. | | | Medical Services | 7 | E | | |
| OSF Saint Anthony Medical Center 5666 E. State Street Rockford, IL 61108-2472 | x | J | | | D | | 915.00 |
| Account No. | + | | Medical Services | + | | | 915.00 |
| Rockford Gastroenterology Assoc. 401 Roxbury Road Rockford, IL 61107-5078 | x | J | | | | | |
| | | | | | | | 320.00 |
| Account No. 4888 | | | Collection For Rockford Radiology | | | | |
| Rockford Mercantile Agency P.O. Box 5847 Rockford, IL 61125 | x | J | | | | | |
| Account No. xxxx/xxxxx/x3179 | 4 | | Collection For OSF | - | | | 1.00 |
| Rockford Mercantile Agency P.O. Box 5847 Rockford, IL 61125-0847 | x | J | | | | | 4.00 |
| Account No. x0829 | ╁ | | Collection For Rockford Gastro | + | | | 1.00 |
| Rockford Mercantile Agency P.O. Box 5847 Rockford, IL 61125-0847 | x | J | | | | | 1.00 |
| Shoot no. 7 of 0 shoots attached to Saladala | of. | 1 | | Cul | tot- | | 1.00 |
| Sheet no. 7 of 9 sheets attached to Schedule Creditors Holding Unsecured Nonpriority Claims | JI | | (Total of | Sub this | | | 1,238.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No. | _ |
|-------|------------------|----------|---|
| _ | | Debtor | |

| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Medical Services | COZHLZGEZ | UZLLQULDATE | DISPUTED | AMOUNT OF CLAIM |
|--|------------------|---|-----------|-------------|----------|-----------------|
| Rockford Radiology P.O. Box 5368 | | Medical Services | _ | ı A | ı | |
| P.O. Box 5368 | | | Т | E | | |
| | J | | | D | | 209.00 |
| Account No. | | Medical Services | | | | 200.00 |
| St. Anthony Medical Center P.O. Box 5065 Rockford, IL 61125-0065 | J | | | | | |
| | | | | | | 8,841.00 |
| Account No. xxxxxxxx2943 The Home Depot P.O. Box 6497 Sioux Falls, SD 57117 | н | Charge Card | | | | 257.00 |
| Account No. xxxx-xxxx-4314 | | Charge Card | | | | |
| Washington Mutual P.O. Box 660509 Dallas, TX 75266-0509 | - | | | | | 5,619.00 |
| Account No. xxxx-xxxx-4314 | | Collection For Washington Mutual | | | | |
| Washington Mutual Payment Processin P.O. box 660548 Dallas, TX 75266-0548 | _ | | | | | 1.00 |
| Sheet no. 8 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | (Total of | Sub | | | 14,927.00 |

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B6F (Official Form 6F) (12/07) - Cont.

| In re | William P. Blair | Case No | _ |
|-------|------------------|---------|---|
| | | Debtor | |

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxx-xxxx-xxxx-1095 Washngton Mutual P.O. Box 660487 | CODEBTOR | C Hu | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. Charge Card | CONTINGENT | UN NI LLI GOLDEN | J [] [] [] [] [] [] [] [] [] [| | AMOUNT OF CLAIM |
|--|----------|------|--|-------------|--|---|---|-----------------|
| Dallas, TX 75266-0487 | | | | | | | | 744.88 |
| Account No. xxxxxxxxx9890 Wells Fargo P.O. Box 29704 Phoenix, AZ 85038 | | J | Charge Card | | | | | |
| Account No. | | | | | | | | 5,813.00 |
| Account No. | | | | | | | | |
| Account No. | | | | | | | | |
| | | | | | | | | |
| Sheet no. 9 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | 1 | (Total of | Sub this | | |) | 6,557.88 |
| | | | (Report on Summary of S | | To: | |) | 55,127.38 |

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B6G (Official Form 6G) (12/07)

| In re | William P. Blair | Case No. |
|-------|------------------|----------|
| - | | , |
| | | Debtor |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 09-72444 Doc 1 Filed 06/15/09 Entered 06/15/09 11:46:22 Desc Main Document Page 27 of 50

B6H (Official Form 6H) (12/07)

| In re | William P. Blair | Case No. |
|-------|------------------|----------|
| | | |

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors. NAME AND ADDRESS OF CODEBTOR NAME AND ADDRESS OF CREDITOR **Blair Construction HSBC Business Solutions** 417 Poachers Circle P.O. Box 5219 Carol Stream, IL 60197-5219 Belvidere, IL 61008-7894 **Blair Construction HSBC Business Solutions** 417 Poachers Circle P.O. Box 4160 Belvidere, IL 61008-7894 Carol Stream, IL 60197 **OSF Saint Anthony Medical Center** Deborah A. Blair 5666 E. State Street N8281 Storms Road Phillips, WI 54555 Rockford, IL 61108-2472 Deborah A. Blair **OSF Saint Anthony Medical Center** 5666 E. State Street N8281 Storms Road Phillips, WI 54555 Rockford, IL 61108-2472 Deborah A. Blair **OSF Saint Anthony Medical Center** N8281 Storms Road 5666 E. State Street Phillips, WI 54555 Rockford, IL 61108-2472 Deborah A. Blair **NICOR Gas** N8281 Storms Road P.O. Box 8350 Phillips, WI 54555 Aurora, IL 60507-8350 Deborah A. Blair Rockford Gastroenterology Assoc. 417 Poachers Circle 401 Roxbury Road Belvidere, IL 61008 Rockford, IL 61107-5078 **Rockford Mercantile Agency** Deborah A. Blair 417 Poachers Circle P.O. Box 5847 Belvidere, IL 61008 Rockford, IL 61125 Deborah A. Blair **Rockford Mercantile Agency** N8281 Storms Road P.O. Box 5847 Phillips, WI 54555 Rockford, IL 61125-0847 Deborah A. Blair **Rockford Mercantile Agency** 417 Poachers Circle P.O. Box 5847 Belvidere, IL 61008 Rockford, IL 61125-0847

417 Poachers Circle Belvidere, IL 61008

Deborah A. Blair 417 Poachers Circle

Deborah A. Blair

Belvidere, IL 61008

Washington Mutual P.O. Box 660509 Dallas, TX 75266-0509

Rockford, IL 61125-0368

Rockford Radiology

P.O. Box 5368

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| In re | William P. Blair | Case No | - |
|-------|------------------|---------|---|
| | | Debtor | |

SCHEDULE H - CODEBTORS (Continuation Sheet)

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|---------------------------------|
| Deborah A. Blair | Washington Mutual |
| N8281 Storms Road | c/o Codilis & Associates |
| Phillips, WI 54555 | 15W030 North Frontage Rd., #100 |
| • , | Burr Ridge, IL 60527 |
| Deborah A. Blair | Wells Fargo |
| N8281 Storms Road | P.O. Box 29704 |
| Phillips, WI 54555 | Phoenix, AZ 85038 |
| Deborah A. Blair | Cevene Care Clinic |
| N8281 Storms Road | 6451 E. Riverside Blvd., #103 |
| Phillips, WI 54555 | Rockford, IL 61114-4421 |
| Deborah A. Blair | Cevene Care Clinic |
| N8281 Storms Road | 6451 E. Riverside Blvd., #103 |
| Phillips, WI 54555 | Rockford, IL 61114-4421 |
| Deborah A. Blair | Account Recovery Services, Inc. |
| N8281 Storms Road | P.O. Box 2526 |
| Phillips, WI 54555 | Loves Park, IL 61132 |
| Deborah A. Blair | Attorney Ray A. Ferguson |
| N8281 Storms Road | 216 N. Court Street |
| Phillips, WI 54555 | Rockford, IL 61103 |
| Deborah A. Blair | Codilis & Associates, P.C. |
| N8281 Storms Road | 15W030 North Frontage Road |
| Phillips, WI 54555 | Suite 100 |
| | Willowbrook, IL 60527 |

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B6I (Official Form 6I) (12/07)

| In re | William P. Blair | | Case No. | |
|-------|------------------|-----------|----------|--|
| | · | Dobtor(c) | | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPENDENTS OF DEBT | OR AND SPOUS | SE | | |
|---|--|----------------|--------|----------|------------|
| Divorced | RELATIONSHIP(S): Son Son Daughter Daughter | AGE(S): | | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | Unemployed | | | | |
| Name of Employer | | | | | |
| How long employed | | | | | |
| Address of Employer | | | | | |
| INCOME: (Estimate of average or p | projected monthly income at time case filed) | DI | EBTOR | S | POUSE |
| | commissions (Prorate if not paid monthly) | \$ | 0.00 | \$ | N/A |
| 2. Estimate monthly overtime | | \$ | 0.00 | \$ | N/A |
| 3. SUBTOTAL | | \$ | 0.00 | \$ | N/A |
| 4. LESS PAYROLL DEDUCTIONS | | \$ | 0.00 | \$ | N/A |
| a. Payroll taxes and social secub. Insurance | nty | \$ | 0.00 | \$ | N/A |
| c. Union dues | | \$ | 0.00 | \$ | N/A |
| d. Other (Specify): | | \$ | 0.00 | \$ | N/A |
| u. Oner (Specify). | | \$ | 0.00 | \$ | N/A |
| 5. SUBTOTAL OF PAYROLL DED | DUCTIONS | \$ | 0.00 | \$ | N/A |
| 6. TOTAL NET MONTHLY TAKE | HOME PAY | \$ | 0.00 | \$ | N/A |
| 7. Regular income from operation of | business or profession or farm (Attach detailed statement) | \$ | 0.00 | \$ | N/A |
| 8. Income from real property | | \$ | 0.00 | \$ | N/A |
| 9. Interest and dividends | | | 0.00 | \$ | N/A |
| Alimony, maintenance or support payments payable to the debtor for the debtor's use or that o dependents listed above | | | 0.00 | \$ | N/A |
| 11. Social security or government as | sistance | Φ. | 0.00 | Φ. | 21/4 |
| (Specify): | | \$ | 0.00 | \$ | N/A |
| 12 D : | | \$ | 0.00 | \$ | N/A N/A |
| 12. Pension or retirement income13. Other monthly income | | Φ | | 3 | |
| (Specify): | | \$ | 0.00 | \$ | N/A |
| | | \$ | 0.00 | \$ | N/A |
| 14. SUBTOTAL OF LINES 7 THRO | DUGH 13 | \$ | 0.00 | \$ | N/A |
| 15. AVERAGE MONTHLY INCOM | ME (Add amounts shown on lines 6 and 14) | \$ | 0.00 | \$ | N/A |
| 16. COMBINED AVERAGE MONT | | \$ | 0.00 | | |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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B6J (Official Form 6J) (12/07)

| In re | William P. Blair | | Case No. | |
|--------|------------------|-----------|-----------|---|
| 111 10 | | Debtor(s) | Cuse 110. | - |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

| filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22 | | e monthly |
|---|---------------|---------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separat | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 0.00 |
| a. Are real estate taxes included? Yes No _X_ | | |
| b. Is property insurance included? Yes No _X_ | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 220.00 |
| b. Water and sewer | \$ | 37.00 |
| c. Telephone | \$ | 250.00 |
| d. Other Comcast | \$ | 140.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 25.00 |
| 4. Food | \$ | 800.00 |
| 5. Clothing | \$ | 50.00 |
| 6. Laundry and dry cleaning | \$ | 25.00 |
| 7. Medical and dental expenses | \$ | 200.00 |
| 8. Transportation (not including car payments) | \$ | 650.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 0.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 134.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 120.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | · | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other Childrens' Summery Education Fees | \$ | 200.00 |
| Other | \$ | 0.00 |
| 40. 44750 46734634744 44750 447 | | 0.054.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 2,851.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| 20. STATEMENT OF MONTHLY NET INCOME | | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 0.00 |
| b. Average monthly expenses from Line 18 above | \$ | 2,851.00 |
| c. Monthly net income (a. minus b.) | \$ | -2,851.00 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | | Case No. | | | |
|-------|---|-------------------|-----------------------|-----------------|------------------|--|--|
| | | | Debtor(s) | Chapter | 7 | | |
| | | | | | | | |
| | | | | | | | |
| | DECLARATION | CONCERN | ING DEBTOR'S | SCHEDUL | ES | | |
| | | | | | | | |
| | DECLARATION UNDE | ER PENALTY O | OF PERJURY BY INC | OIVIDUAL DEI | BTOR | | |
| | | | | | | | |
| | | | | | | | |
| | I declare under penalty of periur | v that I have rea | nd the foregoing summ | arv and schedul | es consisting of | | |
| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief. | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Date | June 15, 2009 | Signature | /s/ William P. Blair | | | | |
| Date | 04110 10, 2000 | Bigilature | William P. Blair | | | | |
| | | | Debtor | | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | | |
|-------|------------------|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$6,529.52 2009 Year To Date Wages

\$20,741.00 2008 Gross Wages

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$17.00 2007 Interest Income

2

AMOUNT SOURCE

\$18,619.00 2007 Unemployment Compensation \$3,061.00 2008 Unemployment Compensation \$4,000.00 2009 Liquidation Of Whole Life Policies.

\$5,000.00 2009 Pension Distributions

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF NAME AND ADDRESS AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR VALUE OF AMOUNT STILL PAYMENTS/ **TRANSFERS** TRANSFERS **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT AMOUNT PAID AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT STATUS OR COURT OR AGENCY NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION JP Morgan Chase Bank v. Residential Foreclosure 17th Judicial Circuit, Boone Pending William P. Blair, et al. County

Case No.: 09 CH 145 State of Illinois

Blair v. Blair Dissolution 17th Judicial Circuit, Boone **Pending** Case No.: 09 D 9

County

State of Illinois

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3

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN
DESCRIPTION AND VALUE OF
PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF COURT DATE OF DESCRIPTION AND VALUE OF OF CUSTODIAN CASE TITLE & NUMBER ORDER PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Barrick Switzer Law Office 6833 Stalter Drive Rockford, IL 61108 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR June 4, 2009 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$1,300.00 (Including Filing
Fee)

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

5

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

NAME Blair Construction

ADDRESS 417 Poachers Circle Belvidere, IL 61008-7894 NATURE OF BUSINESS Construction Company

BEGINNING AND ENDING DATES

July 2006 - Current

6

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS **See Tax Return**

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

7

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY RECO

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE
NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year**

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
DATE AND PURPOSE
OF WITHDRAWAL
OF PROPERTY

AMOUNT OF MONEY
OR DESCRIPTION AND
VALUE OF PROPERTY

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated

group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | June 15, 2009 | Signature | /s/ William P. Blair |
|------|---------------|-----------|----------------------|
| | | | William P. Blair |
| | | | Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

| In re | William P. Blair | | Case No. | |
|-------|------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

| | | , |
|--|------------|--|
| Property No. 1 | | |
| Creditor's Name: Citibank, N.A. | | Describe Property Securing Debt: Single Family Residence 417 Poachers Circle Belvidere, IL 61008 |
| Property will be (check one): | | |
| ■ Surrendered | ☐ Retained | |
| If retaining the property, I intend to (check at le ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | | oid lien using 11 U.S.C. § 522(f)). |
| Property is (check one): | | |
| Claimed as Exempt | | ☐ Not claimed as exempt |
| Property No. 2 | | |
| Creditor's Name: Larry Watson | | Describe Property Securing Debt: 2002 Dodge Truck Ram 1500 |
| Property will be (check one): | | |
| ☐ Surrendered | ■ Retained | |
| If retaining the property, I intend to (check at le ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | | oid lien using 11 U.S.C. § 522(f)). |
| Property is (check one): ☐ Claimed as Exempt | | ■ Not claimed as exempt |

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| B8 (Form 8) (12/08) | | | Page 2 |
|--|--------------------------|--|--|
| Property No. 3 | | | |
| Creditor's Name: Washington Mutual | | Describe Property So Single Family Reside 417 Poachers Circle Belvidere, IL 61008 | |
| Property will be (check one): | | | |
| ■ Surrendered | ☐ Retained | | |
| If retaining the property, I intend to (check a ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain | | oid lien using 11 U.S.C. | § 522(f)). |
| Property is (check one): ■ Claimed as Exempt | | ☐ Not claimed as exe | mpt |
| Property No. 4 | |] | |
| Creditor's Name: Wells Fargo | | Describe Property So 2003 Dodge Grand C | |
| Property will be (check one): | _ | | |
| ■ Surrendered | ☐ Retained | | |
| If retaining the property, I intend to (check a □ Redeem the property □ Reaffirm the debt □ Other. Explain | | oid lien using 11 U.S.C. | § 522(f)). |
| Property is (check one): ■ Claimed as Exempt | | ☐ Not claimed as exe | mnt |
| - Claimed as Exempt | | I Not claimed as exe | mpt |
| PART B - Personal property subject to unexp Attach additional pages if necessary.) | pired leases. (All three | columns of Part B mus | st be completed for each unexpired lease. |
| Property No. 1 | | | |
| Lessor's Name: -NONE- | Describe Leased Pro | operty: | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): ☐ YES ☐ NO |
| I declare under penalty of perjury that the personal property subject to an unexpired | | intention as to any pro | operty of my estate securing a debt and/or |
| Date June 15, 2009 | <u> </u> | /s/ William P. Blair William P. Blair | |

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United States Bankruptcy Court
Northern District of Illinois

| In re | e William P. Blair | | Case No | | |
|-------|---|--|---|--|-------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COME | PENSATION OF ATTO | RNEY FOR D | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplation | e filing of the petition in bankruptc | y, or agreed to be p | aid to me, for services rer | |
| | For legal services, I have agreed to accept | | \$ | 1,001.00 | |
| | Prior to the filing of this statement I have receive | ved | \$ | 1,001.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. 7 | The source of compensation to be paid to me is: | | | | |
| | \blacksquare Debtor \square Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed co | ompensation with any other person | unless they are me | mbers and associates of m | y law firm. |
| | ☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the | | | | firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to | to render legal service for all aspec | ts of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and restricted between the preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cred. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applications of the provisions of the provisions of the provisions of the provisions as needed. | statement of affairs and plan which editors and confirmation hearing, a to reduce to market value; ex ations as needed; preparation | n may be required; nd any adjourned h emption plannin | earings thereof; g; preparation and fili | ng of |
| 5. | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding. | | | ces, relief from stay a | ctions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of bankruptcy proceeding. | f any agreement or arrangement for | payment to me for | representation of the debt | or(s) in |
| Date | ed: _ June 15, 2009 | /s/ JASON H. RO | СК | | |
| | | JASON H. ROCK | | | _ |
| | | BARRICK SWITZ 6833 STALTER D | | : | |
| | | ROCKFORD, IL 6 | | | |
| | | (815) 962-6611 F | | 58 | |
| | | irock@hslby.com | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

B 201 (12/08)

Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| • | | |
|---|--|---------------|
| JASON H. ROCK | X /s/ JASON H. ROCK | June 15, 2009 |
| Printed Name of Attorney | Signature of Attorney | Date |
| Address: | | |
| 6833 STALTER DRIVE | | |
| ROCKFORD, IL 61108 | | |
| (815) 962-6611 | | |
| irock@bslbv.com | | |
| | Certificate of Debtor | |
| I (We), the debtor(s), affirm that I (we) | | |
| 1 (we), the debtor(s), armin that I (we) | mave received and read this notice. | |
| William P. Blair | ${ m X}^{\prime}$ /s/ William P. Blair | June 15, 2009 |
| Printed Name(s) of Debtor(s) | Signature of Debtor | Date |
| | - | |
| Case No. (if known) | X | |
| · | Signature of Joint Debtor (if any) | Date |
| | | |
| | | |

United States Bankruptcy Court Northern District of Illinois

| | | Northern District of Illinois | | |
|-------|---|--|-------------------------|-------------------|
| In re | William P. Blair | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | V | ERIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 46 |
| | The above-named Debtor(s (our) knowledge. | s) hereby verifies that the list of credit | ors is true and correct | to the best of my |
| | | | | |

Account Recovery Services, Inc. P.O. Box 2526 Loves Park, IL 61132

AFNI, Inc. P.O. Box 3097 Bloomington, IL 61702

Attorney Ray A. Ferguson 216 N. Court Street Rockford, IL 61103

Blain's Farm & Fleet P.O. Box 981439 El Paso, TX 79998

Blain's Farm & Fleet GE Money Bank P.O. Box 960061 Orlando, FL 32896-0061

Blair Construction 417 Poachers Circle Belvidere, IL 61008-7894

Bureau of Collection Recovery, Inc. 7575 Corporate Way Eden Prairie, MN 55344

Capital One P.O. Box 30281 Salt Lake City, UT 84130

Capital One P.O. Box 70886 Charlotte, NC 28272-9903

Capital One Bank USA, N.A. P.O. Box 6492 Carol Stream, IL 60197-6492

Cevene Care Clinic 6451 E. Riverside Blvd., #103 Rockford, IL 61114-4421 Chase Cardmember Service P.O. Box 15153 Wilmington, DE 19886-5153

Chase Cardmember Service P.O. Box 15548 19886-5548

Chase Card Services P.O. Box 659509 San Antonio, TX 78265

Citi P.O. Box 6241 Sioux Falls, SD 57117

Citibank, N.A. P.O. Box 209012 Brooklyn, NY 11220-9012

Codilis & Associates, P.C. 15W030 North Frontage Road Suite 100 Willowbrook, IL 60527

Creditors' Protection Service 202 W. State Street, Suite 300 P.O. Box 4115 Rockford, IL 61110-0615

Deborah A. Blair N8281 Storms Road Phillips, WI 54555

Deborah A. Blair 417 Poachers Circle Belvidere, IL 61008

GE Money Bank P.O. Box 981127 El Paso, TX 79998-1127 Guzzardo Performance Music 3010 Charles Street Rockford, IL 61108

Home Depot Credit Services Processing Center Des Moines, IA 50364-0500

HSBC Business Solutions P.O. Box 5219 Carol Stream, IL 60197-5219

HSBC Business Solutions P.O. Box 4160 Carol Stream, IL 60197

HSBC/Bergners P.O. Box 15521 Wilmington, DE 19805

Ignacio Omengan, MD 461 N. Mulford Road, Suite 10 Rockford, IL 61107-5288

Janet Wattlers Center 526 W. State Street Rockford, IL 61101

Kay Jewelers 375 Ghent Road Akron, OH 44333

Kay Jewelers
P.O. Box 740425
Cincinnati, OH 45274-0425

Kay Jewelers P.O. Box 1799 Akron, OH 44309

Larry Watson 110 E. Roosevelt Road Stillman Valley, IL 61084-8809 Lowe's P.O. Box 981064 El Paso, TX 79998

NICOR Gas P.O. Box 8350 Aurora, IL 60507-8350

OSF Saint Anthony Medical Center 5666 E. State Street Rockford, IL 61108-2472

Rockford Gastroenterology Assoc. 401 Roxbury Road Rockford, IL 61107-5078

Rockford Mercantile Agency P.O. Box 5847 Rockford, IL 61125

Rockford Mercantile Agency P.O. Box 5847 Rockford, IL 61125-0847

Rockford Radiology P.O. Box 5368 Rockford, IL 61125-0368

St. Anthony Medical Center P.O. Box 5065 Rockford, IL 61125-0065

The Home Depot P.O. Box 6497 Sioux Falls, SD 57117

Washington Mutual c/o Codilis & Associates 15W030 North Frontage Rd., #100 Burr Ridge, IL 60527

Washington Mutual P.O. Box 660509 Dallas, TX 75266-0509

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Washington Mutual Payment Processin P.O. box 660548 Dallas, TX 75266-0548

Washngton Mutual P.O. Box 660487 Dallas, TX 75266-0487

Wells Fargo P.O. Box 29704 Phoenix, AZ 85038